Revised as of January 2015 Per CSC Resolution No. 1500088 Promulgated on January 23, 2015

SWORN STATEMENT OF ASSETS. LIABILITIES AND NET WORTH

As of December 2018

(Required by R.A. 6713)

ECLARANT:	TABUDLONG	SHEENA EUNICE	В.	POSITION:	INTRUCTOR I
-	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:	IHK / VSU
DRESS:	673 A. BONIFA	ACIO ST. BAYBAY CITY, I	EYTE	OFFICE ADDRESS:	VISCA BAYBAY CITY, LEYTE
POUSE:	N/A			POSITION:	
	14/1/	(First Name)	(.I.M)	AGENCY/OFFICE:	7397
	(Family Name)	(First Name)	(141.11.)	THE RESIDENCE OF THE PARTY AND ADDRESS OF THE	
UNMARRII	93A 30 23AG	TERM OF BUSHESS	enter de description de la constant	OFFICE ADDRESS:	DECLARANT'S HOUSEHO
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UNMARRII N/A	ED CHILDREN E	BELOW EIGHTEEN	enter andre en enter endere	OFFICE ADDRESS:	

1 ACCETE

a. Real Properties*

DESCRIPTION (e.g. lot, house and	(c.g. residential, LOCATION VALUE MAR		CURRENT FAIR MARKET VALUE			ACQUISITION	
lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)		(As found in the Tax Declaration of Real Property)		YEAR	MODE	100000000000000000000000000000000000000
N/A							
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to villed,	Moreou to 1978:		e laberation	atives to use go	Lat Villa		als been trained

Subtotal:

NA

b. Personal Properties*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT
Nikon Camera DSLR 5100	mercus 2013 succession at 2013 succession	30,000
Clothes and Shoes	2013-2018	20,000
AIRCONDITIONER: SANYO CARRIER (Second Hand)	2015	3,000
Mobile Phone: SAMSUNG S7 (2 YEAR SMART PLAN)	2016	45,600 (1,900/MONTH)
Camera Prime Lens	2016	8,000
Go Pro Camera and Accessories	2017	28,000
Laptop	2018	42,000
Cash in Bank	2018	50,000

Subtotal:

226,600

TOTAL ASSETS (a+b):

226,600

^{*} Additional sheet/s may be used, if necessary.

2. LIABILITIES*

NATURE AND COLOR	NAME OF CREDITORS	OUTSTANDING BALANCE
N/A		
	Martine a mark production and major the small trade and a state	Programme W

TOTAL LIABILITIES:

NA

NET WORTH: Total Assets less Total Liabilities =

226,600

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)

2 I/We do not have any business interest or financial connection.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION
N/A	PITTLE TO STAG	716.0	
15 5 5 5 11			

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

I/ We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
ELSA B. TABUDLONG	MOTHER	EDUC. SUPERVISOR	DEPED BAYBAY CITY, LEYTE
MELANIE B. VELASCO	AUNT	NURSE	WLPH, BAYBAY CITY, LEYTE
ROWENA L. BATHAN	AUNT	PRINCIPAL	BRGY SAN ISIDRO ELEMENTARY SCHOOL
NORIETA B. BUSTILLO	AUNT	ADMINSTRATIVE STAFF	VISAYAS STATE UNIVERSITY, VISCA BAYBAY CITY, LEYTE
ROSEMARIE B. ALIDRO	COUSIN	TEACHER	BAYBAY 1 CENTRAL SCHOOL, BAYBAY CITY

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

Date:DECE	MBER 4, 2018	
for 3	The same	AND COUNTRY OF LABOUR CONTRACTOR
(Signy	dture of Declarant)	(Signature of Co-Declarant/ Spouse)
	Hallin	Government Issued ID:
Government Issued TD:	VSU ID	Government Issued ID:
Government Issued TD: ID No.:	VSU 1D V00751	ID No.:

SUBSCRIBED AND SWORN to before me this __day At _0 7 2019 ffiant exhibiting to me the above-stated government issued identification card.

(Person Calments Ging Oath)

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^{*} Additional sheet/s may be used, if necessary.